## State of California - Dept. Health and Human Service Agency

Native American Tribal Program Time Survey for Employees Performing Medi-Cal Administrative Activities and/or Targeted Case Management

## Instructions:

- 1. Include 2-3 samples of activities for the designated Codes on the separate Written Samples form provided.
- 2. Complete the survey on a daily basis for the designated time survey period.
- 3. Draw a vertical line through columns that represent days that are unpaid (unpaid leave).
- 4. Record time in 15-minute increments, use decimals .25, .50, .75 for partial hour increments.
- 5. Daily totaled hours must equal all hours paid.
- 6. Be sure to include all training, paperwork, clerical activities, and staff travel required to complete each activity for codes 1-22 during the survey period.
- 7. If hours paid equal more than 8, continue on second survey form.
- 8. When multiple activities are performed in a fifteen minute period, the activity performed for the greater amount of time should be coded to that fifteen minute increment.